

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000393601

**Entity Name:** GOLF LINKS, LLC

**Current Principal Place of Business:**

1656 MAIN STREET  
SARASOTA, FL 34236

**Current Mailing Address:**

1656 MAIN STREET  
SARASOTA, FL 34236 US

**FEI Number:** 85-4398002

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

BARNETT, LESLIE J  
601 BAYSHORE BOULEVARD, STE. 700  
TAMPA, FL 33606 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:** \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Authorized Person(s) Detail :**

Title MGR  
Name URSINI, MARK A  
Address 1656 MAIN STREET  
City-State-Zip: SARASOTA FL 34236

Title MGR  
Name URSINI, GINA M  
Address 1656 MAIN STREET  
City-State-Zip: SARASOTA FL 34236

Title MGR  
Name LEIBOWITZ, EDWARD R  
Address 16404 MILLAN DE AVILA  
City-State-Zip: TAMPA FL 33613

Title MGR  
Name BAINS, SARAH  
Address 16404 MILLAN DE AVILA  
City-State-Zip: TAMPA FL 33613

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** GINA URSINI

**MANAGER**

**01/26/2023**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date